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DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10014433-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARA	TUS FOR SHOCK AND VIBRA	TION ISOLATION C	OF A CIRCUIT COMPONENT			
	ch is attached hereto unless th					
() was filed on	as US Application No. or PCT International Application					
Number	and was amended on (if applicable).					
including the claims as	ave reviewed and understood to a amended by any amendment which is material to patentabili	(s) referred to above	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.			
inventor(s) certificate listed b	benefits under Title 35. United State	ny foreign application foi	any foreign application(s) for patent or patent or inventor(s) certificate having			
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C 119			
			YES· NO			
			YES· NO:			
Provisional Application I hereby claim the benefit un below:	der Title 35, United States Code Sect	ion 119(e) of any Unite	d States provisional application(s) listed			
insofar as the subject matter manner provided by the first information as defined in Title	of each of the claims of this applicat paragraph of Title 35. United States	ion is not disclosed in the Code Section 112, I ack ction 1.56(a) which occu	States application(s) listed below and, ne prior United States application in the knowledge the duty to disclose material irred between the filing date of the prior			
APPLICATION NUMBER	FILING DATE		STATUS (patented/pending/abandoned)			
POWER OF ATTORNEY: As a named inventor, I here business in the Patent and To	eby appoint the following attorney(s) rademark Office connected therewith:	and/or agent(s) to pro	secute this application and transact all			
Customer	Number 022879	Place Customer Number Bar Code Label here				
Send Correspondence to		Direct Teleph	one Calls To:			
HEWLETT-PACKARD COMPANY Intellectual Property Administration		Dave M. Mas	Dave M. Mason			
P.O. Box 272400 Fort Collins, Colorado 80527-2400		(408) 447-40	(408) 447-4046			
I hereby declare that a						
with the knowledge to imprisonment, or both	and belief are believed to be t that willful false statements	true; and further th and the like so m 18 of the United S	are true and that all statements at these statements were made nade are punishable by fine or tates Code and that such willful ent issued thereon.			
with the knowledge to imprisonment, or both	and belief are believed to be to that willful false statements , under Section 1001 of Title deopardize the validity of the ap	true; and further th and the like so m 18 of the United S	at these statements were made nade are punishable by fine or tates Code and that such willful ent issued thereon.			
with the knowledge to imprisonment, or both false statements may just the full Name of Inventor: The	and belief are believed to be to that willful false statements , under Section 1001 of Title deopardize the validity of the ap	true; and further th and the like so m 18 of the United Soplication or any pat Citizenship: L	at these statements were made nade are punishable by fine or tates Code and that such willful ent issued thereon.			

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10014433-1

Full Name of # 2 joint inventor:	Christopher G. Malone		Citizenship: Canadian
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Inventor's Signature		Date	
Full Name of # 2 joint inventor			Citizenship:
Full Name of # 3 joint inventor:			
Residence:			
Post Office Address:			
Inventor's Signature		Date	L-941 -
Full Name of # 4 joint inventor	1		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 5 joint inventor	;		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 6 joint inventor	r:		Citizenship:
Residence:			<u> </u>
Post Office Address:			
		,	
Inventor's Signature		Date	
Full Name of # 7 joint invento	r:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 8 joint invento	r:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	

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